

# Survey of private treatment of sexually-transmitted disease in the North Humberside area

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Published statistics on the incidence of sexually-transmitted disease in the United Kingdom are based on the numbers of patients receiving treatment in the public clinics. Few systematic attempts have been made to estimate the 'dark number' of cases treated elsewhere which, if added to the numbers registered in the clinics, would give a truer indication of the real incidence of these conditions.

In 1957 a questionnaire was circulated to members of the B.M.A. in four selected areas of England, 'in an attempt to determine what proportion of venereal disease was treated outside clinics in 1956' (Venereologists' Group Committee of the B.M.A., 1959). The response rate of 32 per cent. was disappointingly low, but on the basis of replies received a minimum estimate of the number of cases of syphilis, gonorrhoea, and non-gonococcal urethritis treated outside the hospital clinics in the areas concerned amounted to 15.8 per cent. of the number of cases of these conditions registered in the clinics. A follow-up survey in the same areas 7 years later attempted to assess the numbers treated outside the clinics in 1963, but the response was again poor and the results were not published.

A more successful survey, in terms of response rate, was conducted in Scotland in 1964 by a Working Party of the Standing Medical Advisory Committee of the Scottish Health Service Council (British Cooperative Clinic Group, 1968). A questionnaire, circulated among general practitioners in the East of Scotland, brought replies from 85 per cent. of those circularized. The results indicated that some 10 to 12 per cent. of new cases of gonorrhoea in the area were treated by general practitioners in the 3-month period covered by the enquiry.

The survey here reported was on a somewhat smaller scale than those referred to above and was undertaken as part of a more general survey of the changing incidence of sexually-transmitted disease in the North Humberside region.

## Method and results

On January 1, 1971, a preliminary letter was sent to general practitioners in the area selected for the survey, giving advance notice of an enquiry to be made concerning the number of cases of sexually transmitted disease treated by general practitioners in the first quarter of 1971, and requesting doctors to keep a record of such cases.

At the end of March a brief questionnaire was circulated with a covering letter to 154 general practitioners in Hull, Haltemprice, and Beverley, requesting information about the numbers of patients with gonorrhoea, non-gonococcal urethritis (males only), or primary or secondary syphilis, seen during the period January 1 to March 31. Completed forms were returned by 138 doctors, an encouraging response rate of 90 per cent. Of the written replies received, 91 indicated that no cases of these conditions had been seen, and 47 reported that one or more cases had been seen during the relevant period.

The replies from the 47 doctors who reported seeing cases indicated that 29 doctors had referred every case to a VD clinic, and eighteen had treated some or all cases themselves, or had referred patients for treatment elsewhere (*i.e.* not to a VD clinic). Three cases were recorded as having been thus referred.

Replies from the sixteen doctors (10 per cent. of those surveyed) who reported treating cases themselves indicated that altogether they had treated 25 patients with symptoms of gonorrhoea or non-gonococcal urethritis during the 3-month period. Of these 25 cases, two were recorded as having subsequently attended a VD clinic; others are believed to have done so. In addition to these 25 patients, three with symptoms had been referred for private treatment elsewhere.

An attempt was made to check whether doctors who failed to return a completed questionnaire

differed significantly in their response to patients with venereal disease symptoms, from the doctors who replied. The geographical distribution of those doctors who failed to return a questionnaire was examined and their practices were found to be widely scattered within the survey area and to be situated in residential districts of diverse types. Examination of the local clinic records revealed that a majority of them had referred patients to the clinic at one time or another. It was hypothesized that failure to return a completed questionnaire was, in general, associated with chance circumstances, forgetfulness, aversion to form-filling, etc., and not with significantly different patterns of treatment or referral. Eight doctors—a 50 per cent. sample of those who failed to return a questionnaire—were contacted and reminded of the aims of the survey, as set out in the covering letter. All then volunteered to provide the required information, and it was found that five out of the eight doctors had seen no patients with sexually transmitted infections, while three had seen 4 patients, all of whom had been referred to public clinics. This pattern corresponded with the pattern observed among the original respondents, and tended to confirm the hypothesis regarding non-responders.

Enquiries conducted among consultants brought replies which indicated that six cases of non-gonococcal urethritis had been treated by specialists without reference to the venereal disease clinic during the relevant period.

Some 179 new cases of syphilis, gonorrhoea, and non-gonococcal urethritis attended the special clinic in Hull during the period under review. It would seem that, allowing for a degree of under-recording of cases treated privately by general practitioners responding to our survey (say 25 per cent.), the

proportion of new cases not registered in the clinic records is unlikely to have exceeded 20 per cent. of those receiving treatment in the area during the survey period.

### Summary

From a survey of general practitioners in an area of the North Humberside Region, it is calculated that the proportion of syphilis, gonorrhoea, and non-gonococcal urethritis treated outside the clinics is unlikely to have exceeded 20 per cent. of all cases treated in the area.

Acknowledgement is made to the Standing Medical Advisory Committee of the Scottish Health Services Council for helpful information concerning the survey referred to above.

### References

- BRITISH COOPERATIVE CLINICAL GROUP (1968) *Brit. J. vener. Dis.*, **44**, 299 (Annex II)  
 VENEREOLOGISTS' GROUP COMMITTEE OF THE BRITISH MEDICAL ASSOCIATION (1959) *Ibid.*, **35**, 111

### Enquête sur le traitement des maladies vénériennes en pratique privée dans la région du North Humberside, Angleterre

#### SOMMAIRE

D'après une enquête auprès des généralistes, dans une zone de la région du North Humberside, on calcule que la proportion des cas de syphilis, de gonococcie et d'urétrite non gonococcique traités en dehors des cliniques ne dépasse probablement pas 20 pour cent de tous les cas traités dans cette zone.